

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
**TRANSCRIPT ORDER FORM**

111 First Street  
Bay City, MI 48708

211 W. Fort Street  
17th Floor  
Detroit, MI 48226

226 W. Second Street  
Flint, MI 48502

**Order Party: Name, Address and Telephone Number**

Name Shannon Deeby  
Firm Clark Hill PLC  
Address 151 S. Old Woodward Ave., Ste. 200  
City, State, Zip Birmingham, MI 48009  
Phone 248.988.5889  
Email sdeeby@clarkhill.com

**Case/Debtor Name:** City of Detroit, Michigan

**Case Number:** 13-53846

**Chapter:** 9

**Hearing Judge** Hon. Steven Rhodes

**Bankruptcy**     **Adversary**

**Appeal**    **Appeal No:** \_\_\_\_\_

**Hearing Information** (A separate form must be completed for **each** hearing date requested.)

**Date of Hearing:** 09/05/2014    **Time of Hearing:** 9:00 a.m.    **Title of Hearing:** Confirmation

Please specify portion of hearing requested:  **Original/Unredacted**     **Redacted**     **Copy (2<sup>nd</sup> Party)**

**Entire Hearing**     **Ruling/Opinion of Judge**     **Testimony of Witness**     **Other**

**Special Instructions:** \_\_\_\_\_

**Type of Request:**

- Ordinary Transcript - \$3.65 per page (30 calendar days)**  
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Transcript To Be Prepared By \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_

Order Received: \_\_\_\_\_

Transcript Ordered: \_\_\_\_\_

Transcript Received: \_\_\_\_\_

**Signature of Ordering Party:**

/s/ Shannon L. Deeby    Date: 9/8/14  
By signing, I certify that I will pay all charges upon completion of the transcript request.